PTO/SB:17 (07-07) Approved for use through 05/30/2010 OMB 0651-0032

Under the Paperwork Re	duction Act of 1995	no person are required		on of informatio		s a valid QMB c		
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known				
	- 4-p		10/674,367-Conf. #4434					
FEE TR	Filing Date		October 1, 2003 Yoshihide IWAKI					
Fo	First Named In Examiner Name	ronnor 1	S. T. Kapushoc					
			1634					
Applicant claims sn	Art Unit	701.000						
TOTAL ASSOUNT OF PAYS	RENT	(\$) 120.00	Attorney Docker	t No. 2	870-0266P			
METHOD OF PAYME	NT (check all ti	rat apply)						
Cheek Credit				(please identify				
x Deposit Account D					Birch, Stewa	***************************************	& Birch,	
For the above-ide	entified deposit a	eccount, the Directo	r is hereby authoriz	ed to: (check	k all that apply)			
x Charge fee	(s) indicated bel	OW	Charg	ge fee(s) indi	icated below, e	xcept for the	e filing te	
	additional fee(s	<ul> <li>or underpayments</li> <li>nd 1.17</li> </ul>	of X Credi	t any overpa	yments			
FEE CALCULATION				***************************************	***************************************			
1. BASIC FILING, SEAR	CH, AND EXAM							
			EARCH FEES		ATION FEES			
Application Type	Fee (\$)	Small Entity Fee (5) Fee	(\$) Small Entity (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	aid (\$)	
Utility	300	150 50	0 250	200	100			
Design	200	100 10	0 50	130	65			
Plant	200	100 30	0 150	160	80			
Reissuc	300	150 50	0 250	600	300			
Provisional	200	100	0 0	0	0			
2. EXCESS CLAIM FEES	3						mall Entit	
Fee Description						Fee (\$)	Fee (\$)	
Each claim over 20 (incl.						50	25	
Each independent claim		g Reissues)				200	100	
Multiple dependent clain	18					360	180	
Total Claims Extra Claims Fee (5) Fee I		e Paid (\$)						
HP = highest number of total	×			Fee	2 (S)	Fee Paid (\$)		
			e Paid (\$)	**********			-	
2 -3*		ee (\$) FG	e rate (e)					
HP × highest rumber of indep		for, if greater than 3.						
3. APPLICATION SIZE P	EE							
If the specification and	drawings exoce							
listings under 37 CF					tity) for each a	dditional 50		
sheets or fraction the								
Total Sheets Extra Shoets Number of each additional 50 or fraction thereof						Fee Paid (\$)		
- 100 « /SG » (round up to a whole rounter) x 4. OTHER FEE(S)					·	Fees Paid (\$)		
Non-English Specific	ation \$130 fee	in witten flems on i	count)			Ches c	WIG [9]	
Other (e.g., tate filing			,	irst month		120	0.00	
SUBMITTED BY								
Signature C	11.42	32472584	Registration No. (Attorney/Agent)	32,181	Telephone	(703) 205	-8000	
Name (Print/Type) Marc S	San		E Current making Gaptal		Date	July 27		